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OFFICE OF PETITIONS

SPECIAL PROCEDURES SUBMISSION

DOCKET NO. M0506-703330

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Address to:
Mail Stop Petitions
Office of Petitions
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Application Number	107705,672
Confirmation Number	4665
Filing Date	November 10, 2003
First Named Inventor	William T. Clark
Group Art Unit	2831
Examiner Name	Mayo III, William H.

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application.

NOTE: Request for Continued Examination (RCE) practice under 37 C.F.R. § 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.

1. Submission required under 37 C.F.R. § 1.114

a. Previously submitted

- i. ☐ Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on _____.
(Any unentered amendment(s) referred to above will be entered.)
- ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____.
iii. ☐ Other:

b. Enclosed is/are:

- i. ☐ Amendment/Reply
- ii. ☐ Affidavit(s)/Declaration(s)
- iii. ☒ Information Disclosure Statement (IDS)
- iv. ☒ Other: Petition to Withdraw Application from Issue Under 37 C.F.R. §1.313(c)(2) and M.P.E.P. §1308

2. Miscellaneous

- a. ☐ Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of ____ months. (Period of suspension shall not exceed 3 months) and the Fee of \$130.00 under 37 C.F.R. § 1.17(i) is enclosed.
- b. ☐ Other:

3. Fees - The RCE fee under 37 C.F.R. §1.17(e) is required by 37 C.F.R. §1.114 when the RCE is filed.

- a. ☐ Enclosed is a check in the amount of \$_____ which covers:
 - i. ☐ RCE fee required under 37 C.F.R. § 1.17(e)
 - ii. ☐ Extension of time fee (37 C.F.R. §§ 1.136 and 1.17)
 - iii. ☐ Other

4. If the filing of this RCE necessitates an extension of time under 37 CFR §1.136(a), the applicant hereby requests such extension of time.

5. Please charge the RCE filing fee of \$790.00 and the Petition Fee of \$130.00 to Deposit Account No. 50/2762. The Director is hereby authorized to charge any deficiency or credit any overpayment to Deposit Account No. 50/2762.

6. CORRESPONDENCE ADDRESS

Customer Number: 37462

7. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

NAME Gary S. Engelson, Reg. No. 35,128

SIGNATURE

DATE

October 19, 2005

CERTIFICATE OF FACSIMILE TRANSMISSION UNDER 37 C.F.R. §1.8(a)

The undersigned hereby certifies that this document is being transmitted via facsimile to the attention of FAX number (571) 273-0025, Mail Stop Petitions, Office of Petitions, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the 19th day of October, 2005.

Sylvana Householder
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